APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OR OTHER THAN FOR NUMBER FLED NUMBER EXTRA RATE (3) FEE (3) (STAD 1 19(4) (9) 0 (2)) NVA NVA NVA 150 00 RATE (1) FE	Substitute for Form PTO-675 Effective December 8, 2004								Application of Docket Number			
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FREST PRESENTATION OF MALTIPLE OBPENDENT CLAIM (DT CFR 1.16(II)) 18 the entry in column 1 is less than the entry in column 2, write "O' in column 3. 18 the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Disprocess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, amount of time you require to complete this form and/or automation form to the USPTO. Time will very depending upon the indisduced exercises.	Total CLAMEN TOTAL CHARGE AMEN TOTAL CHARGE	AIMS AIMS AIMING TER IDMENT Minus CFR 1.16(s)) MALTIPLE DEPENDENT CLAIM MINUS MIN	PRESENT EXTRA (37 CFR 1.16(j))	X X PA	RATE (5) \$ 25 180= TAL O'L FEE ATE (5) 25	ADDI-	OF OR OR	XX XX POAD	SMALL RATE (\$) \$50 = 200 a 360= TAL D'L FEE	ADOI- TIONAL TIONAL	XXIII (G)	
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If you need assistance in completing the form, call 1-800-PTO-9199 and called a size a	r,	ou need assistance in complete	the form call 1.200	, VA	cz313.1460.	•	•		CHMS	IV IMS		

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.